

Data Exchange Focus Group Webinar

June 23, 2011

1:00 am CT

Caroline Westnedge: **[Title Slide]** Hello everyone. Thank you for joining us today for our Data Exchange Focus Group meeting. Yesterday I sent out a document and I am sure you have not had a lot of time to review that in detail so we are going to go over that today.

[Slide 2] It includes information about CDC data exchange requests and that includes the request identification and request products. It also includes the project area data exchange report. We will discuss examples of the report identification and report counts.

Betty Baker is going to walk us through that document. I will turn the call over to her and I am just going to switch to this document quickly. Betty.

Betty Baker: Thank you Caroline. Welcome everybody. I know a lot of the information that we are going to cover today is information you have wanted to see. Hopefully it will be up on the screen in just a second.

Caroline Westnedge: Sorry about that.

Betty Baker: **[Figure 1 - Request File Identification Record Data Definitions]** That is okay. We are not quite ready to publish this document. This review is going to help us make sure that what we are doing is understandable to the project areas. Then we will obtain the final authorization from the CDC to publish it.

At the end of this meeting we will supply you with an updated copy of this particular subset of the entire document.

There were a few typographical errors that went out in this document. I was trying to get out it in a hurry and I apologize for that. I have the corrected document up on the screen here and you will be able to get the corrected document after this meeting.

Okay. Let's start with the request file. CDC is going to determine that they need information about inventory counts due to a public health event. They will notify the project area coordinators about the products that they need and the reporting frequency that they want to occur.

There will be an electronic version of that request that you can use to automate your processes. This first figure represents the header on that file, the first record in that file. It will identify the request and specify the number or the period, whether it is month, week or day. If it is day it will indicate which day.

I want to speak briefly about the day. That is probably a very rare occurrence and it might never happen that there might need to be more than one report from the states during the week. Normally what you would see here would be month or week.

The request will have an identifier, which will just be a number that we will use. When you send us a reply, we will use that number to make sure we are matching up with the right request.

The period unit will be a string, month, week or day. The third field in that first record will be that list of days.

The last field in that record is the record count and that is going to be the number of product records that are going to be in that file - the number of products that the CDC is requesting information on. That is for you to use to make sure that you are getting all the records in the file. Okay. Let's move on to the next figure, Figure 2.

Mac-Arthur Louis: Do we have time to ask questions or do you want to go through the whole then, then we ask question at the end?

Betty Baker: I can stop right now. That is fine.

Mac-Arthur Louis: Okay. In request files, Figure 1, Item Number 2 says period unit. You looking for the word month, M-O-N-T-H or are you looking for 01?

Betty Baker: No, I am looking for the word month.

Mac-Arthur Louis: Word month.

Betty Baker: Yes, with the file we are going to be sending to you. It is going to tell you that we are doing this once a month, once a week or on particular days. So this is going out to you to say we are starting a request and this is going to be a monthly request, which means you are going to report once a month.

Mac-Arthur Louis: But how is this request coming to us?

Betty Baker: It can be in two formats. It will be an electronic file, available in both pipe delimited and XML format. You can choose which you would like to receive.

Mac-Arthur Louis: Right. How are you getting it to us?

Betty Baker: When we start this out, you will be able to go to a Web site and download the file.

Mac-Arthur Louis: Okay. There is still that one question that is still not answered yet.

Betty Baker: Okay. I am sorry.

Mac-Arthur Louis: Every day we have to go to this Web site to check?

Betty Baker: No. You will be notified if there is a new request. Then there is a process in place for notifying the project areas when something is needed. Correct?

Ben Erickson: Yes. Who is asking the question? I am sorry. I did not get your name.

Mac-Arthur Louis: This is Mac-Arthur Louis from New York State Department of Health.

Ben Erickson: Oh. How you doing sir?

Mac-Arthur Louis: Doing file.

Ben Erickson: Basically the process that currently is in place is that our program service consultant has reached out to the SNS coordinator of each project area and let them know that there is going to be a data call for products just like we did during the H1N1.

Mac-Arthur Louis: Okay.

Ben Erickson: They are in that process. Our program service consultants will talk to the appropriate people that they have at their jurisdiction and just let them know

that we need X, Y and Z products. We need it on a monthly basis and then that will start the procedures for putting things in place to build to that location and download that file or create it and to make it happen.

Mac-Arthur Louis: Okay. Who do I speak to to make sure that that data is still accurate in terms of who are our coordinators?

Ben Erickson: I'll have to have someone from the New York City contact. I believe Jim Friday is program service consultant.

Mac-Arthur Louis: I am New York State, not New York City.

Ben Erickson: I am sorry. In either case I am going to have to find someone who is the program service consultant for the New York State then to find out who it is. Our person for New York State I still believe is Jim Friday, but that is on our side. Who on your side is I am not sure because I am not a program service consultant.

Mac-Arthur Louis: Program service consultant. Okay.

Betty Baker: Anyway, the file will be put out there and notification will also go out either via email or telephone or something to notify you that the file is there. You are not going to have to sit there and watch for it.

Mac-Arthur Louis: Okay.

Betty Baker: A future enhancement to that which we will not have ready right away is we will send this file out via PHINMS. The first approach will be that you will pull it from a Web site. However, in the future if you want to automate further, we can set it up to send a PHINMS message to you with the file in it.

Mac-Arthur Louis: Yes. Because on our side we were waiting for a PHINMS approach because that is what we used during H1N1. We do the same thing for the CRA exercise. We have all that already set up.

Betty Baker: Right. We are expecting to receive from you the data via PHINMS.

Mac-Arthur Louis: Right.

Betty Baker: Our message out to you at this point is we were thinking that our best approach would be to start out putting it on a Web site and as soon as possible thereafter setting it up so that we can send these requests out via PHINMS.

Ben Erickson: Hey Betty. This is Ben. I guess what he was looking for is how is that trigger started and basically what happens is the SNS who is at the state is the one who is going to receive the phone call from our program service consultant, the one that is basically assigned to your state and they are going to tell them that we need this product, this product and this product on a monthly basis.

Then that SNS coordinator whoever that individual is will make the necessary procedures happen to notify whoever they need to happen at the state to start to process to get the file, produce the file and send the file.

Mac-Arthur Louis: Okay.

Ben Erickson: Does that help a little bit more?

Mac-Arthur Louis: Sure. Okay.

Betty Baker: It is difficult to look at just a piece of this document that we have done and that is all we are doing today. Our process will be that someone at CDC will figure out there is a need, will contact the SNS coordinator at the same time this file is going to be getting built and placed out there so it is available for you to receive.

Mac-Arthur Louis: Okay. All right, and if you can explain Item Number 3 then I will not talk anymore about this.

Betty Baker: Yes. This was the hardest thing for me to figure out the best way to do this and I think I have it. It is going to be extremely rare that the CDC might want people to report more than once a week. Normally the reporting period will be at the end of the month or at the end of the week.

However if there were some kind of extremely urgent public health need that was such that the CDC needed to know twice a week what the inventory status was, this would allow that to be set up so the things we ask for inventory on - at the end of the day Monday and the end of the day Thursday or any days of the week.

In order to allow that to be N number of days of the week, we figured out that maybe the best way to give it to you would be to tell you which days. In that field that will occur in this request file, and it will say that they need a report at the end of the day Monday and the end of the day Friday.

When you open up and look at it is it will say Monday semicolon Friday. That will tell your system that it needs to take a count Monday night and it needs to take a count Friday night. It is going to send a file after than Monday night count and send a file after that Friday night count.

We really do not expect this to happen but we do not want to design a system where we could not do that if we needed to. Is that a little clearer?

Mac-Arthur Louis: Not really but go ahead. Carry on.

Betty Baker: Okay. Now if you want to take this offline with me after that, I'd be glad to talk about it some more.

Mac-Arthur Louis: Okay.

Ben Erickson: Betty, this may actually help summarize it. The way that this is being set up is that we are aligning with the capabilities document of the measurable outcomes that have been distributed out for everybody to know that reporting frequency and requirements are typically on a weekly basis just like we did with H1N1 at first or it can be on a monthly basis if things start to slow down.

However we are placing procedures in place so that we can make it happen on a daily basis if there is an absolute critical work case scenario event going on and there needs to be up to date information on the inventory. We are putting things in place to give that capability to collect at all levels so that it aligns with the capabilities document.

Mac-Arthur Louis: I have no problem with it. It is just very complicated because you got to go back to the notes to get clarification on what the description of what is being asked. That is all.

Ben Erickson: Basically all that comes down to is when the SNS coordinator gets the list or gets what is being asked, the file just has to be produced and sent or you can go download the file and it will have the list of stuff there. You pull it from your inventory and send it. That is it.

Mac-Arthur Louis: Okay. Now the record counts is the number of product records in the file.

Betty Baker: Right. If we go a little bit further, I can explain that. I will show you an example and then it will start to make a little more sense I think.

Mac-Arthur Louis: Okay.

Betty Baker: **[Figure 2 - CDC Request File Product Record Data Definitions]** In order to show you an example, I want to look at the other kinds of records in the file. The first kind of record was like the header record that says here is a request, here is how often I want it. The next record, Figure 2, is the product record. There is going to be one to many of these in the request.

That product record will have the product name. If this is a pharmaceutical, it is going to be the generic name for that product. If it is a non-pharmaceutical, it will be a common name for that product.

The CDC is compiling a list of non-pharmaceuticals that are potentially going to be requested as one of these inventories so that we can have some kind of common name that is recognizable.

We have a nice friendly NDC code that helps us specifically identify pharmaceuticals but there is nothing like that out there in the industry for things like surgical masks and surgical gloves and respirators. So we are compiling a list that we will provide.

Ben Erickson: A follow up question to that Betty is just to let everybody know that what we are going to do is we are basing everything on a formulary of what you would normally get in a push package file. all the non-pharmaceutical products will

have the same name as what is in the formulary, which you would normally already be getting.

It is not anything new that should be surprising. It is just taking what is existing that we would normally give out in a push package file and getting a name out of those non-pharmaceutical names out to get a list of non-pharmaceutical names.

Betty Baker: Right. One piece of information in the product record is a brand name. The product name and brand name are probably very useful to people who are not fully automated.

If a product has multiple brands, for the same generic there will be multiple records in this file. Then the third field is the NDC. There will be one record in this file for every non-pharmaceutical product being asked for and one record in this file for every pharmaceutical NDC being asked for.

Because it is a generic name, a product could have multiple brands and each one of those brands could have multiple NDC codes. If we look at Figure 3, that might start to make sense here.

[Figure 3 - XML syntax for CDC request file] This is the XML representation for this product or for this file. There is an identification section, which includes that request ID, the period unit and the days and I see a typo. I left the reference count off of it. I apologize. That is why we are going to send you a clean one after this meeting.

We are going to show real data. This is like a map of what the data would be. The identification section ends and the product section ends. There could be a

product and then under that product you can see there are two brands. There is brand Name 1 and brand Name 2.

Underneath each brand name in this example are three NDC codes. Then if you go down, that product ends and another product starts.

Mac-Arthur Louis: Okay.

Betty Baker: **[Figure 4 - sample XML CDC request file]** Now let's look at data, which will be the next figure. Let's say we are doing a request and the request ID is 12345. This is one is a daily report as opposed to a weekly.

In that case we have to tell you we want the report Monday night and Wednesday night. Then we are going to say and here are the products we want. We want phenylalanine hydrochloride. That is the generic name. For that product there is a brand name Rolatuss SR tablet.

For that particular generic brand or generic name and that brand name there are two NDC codes, 00904-1198-40 and 00904-1198-60. That actually represents two requests, one for each NDC code.

Then there is another product and that product is N95 respirator. Now that is not going to have a brand name and that is not going to have an NDC code. It is just going to be the product name.

[Figure 5 - delimited text syntax for CDC request file] That is the way it looks in XML. If you are not familiar with XML, if you look down to the next two Figures 5 and 6, those are the delimited text versions. We have a roadmap first that shows we will have the request ID, the period unit and the day. The other kind of record will be product name, brand name and NDC.

[Figure 6 - sample delimited text for CDC request file] We have an example of that same data up there. The request ID was 12345, the period was day and we show Monday and Wednesday. Then we have the generic name and then after the hydrochloride there is a pipe and then you see Rolatuss SR table and a pipe and then you see one of the NDC codes.

Then you see the same thing on the next record except this is different NDC codes. And in the case of the third product, which was N95 respirator, we have to type to show that we do not have a brand name or and NDC.

Any questions?

Mac-Arthur Louis: Yes. Back to the Figure 1.

Betty Baker: Figure 1? Okay.

Mac-Arthur Louis: What would you say is your record count?

Betty Baker: Yes. The record count in this case would have been three because we are asking for two NDC codes and one not. It makes a lot more sense that it is three when you look at the delimited file. There was an omission in my two...

Mac-Arthur Louis: Documents you sent us.

Betty Baker: Yes. Right. That is that the record counts were missing. They will be in the documents that are available right after this meeting. I apologize again.

It is much more obvious when you look at that delimited text that it is one header record and three product records. It is a little harder to see when you

look at the XML delimited record. If you get down in the point if it is a generic, if it is a pharmaceutical, you are counting NDC codes. If it is not a pharmaceutical, you are just counting names.

Mac-Arthur Louis: Since N95 masks - is this one of those that have a lot of different vendors doing this?

Betty Baker: I would have to defer to Ben or somebody.

Mac-Arthur Louis: Which one do we give you? Everything we have whether we get it from 3M, whatever manufacturer we are getting it from?

Betty Baker: Right. We want to know how many respirators you have. As a matter of fact for something like a respirator, one of the pieces of data we want would be the size. How many large do you have, how many small do you have? Which I am going to look at the next; after we get through with this request section, we are going to look at what you are going to give us back and we will look at the individual fields that are involved there and we will talk about how in the case of a non-pharmaceutical product there is not going to be an NDC code. There might be a size depending upon what kind of product it is. If we told you N95 respirator, we may get a whole bunch of records if you have different sizes, if you have them packed in different manners. If you are keeping track of the lot numbers for those respirators, you are probably giving us a record for each lot you have.

Mac-Arthur Louis: Okay. On the data we are giving you back if you go back to the sample you had for us, you only had NDC code. What do we do in terms of the lot? Where are we going to display the lot back to you so you know which lot we have?

Betty Baker: That is going to be coming up later. What we are looking at right here was a request to you.

Mac-Arthur Louis: Okay.

Betty Baker: When we go on to Figure 7 we are going to be starting to talk about the file you are going to create.

Mac-Arthur Louis: Okay.

Betty Baker: Is there a question about the file you are going to get from us? Okay. Let's look at what you are going to send us.

Paul Petersen: Hey Betty. This is Paul Petersen from Tennessee. I am a little confused - so there are basically two separate processes here. There is either we are going to get a phone call from our program services consultant telling us that they need some information or we are getting an automated request of our inventory management system. Is that correct?

Betty Baker: Somebody will always get the phone call. Those project areas that are ready for an automated electronic file will be able to get the electronic file. The request notification that there is a need will not just say okay, now go look on the Web and find out what the need is. That notification will include the products that are being requested.

You will be getting both. Somebody is always going to get the phone call. People who want the electronic file will be able to pick it up. You will not need to go get it until you get the phone call. That will be your notification that the file is ready or the email, however they notify everybody.

Paul Petersen: Thank you.

Betty Baker: **[Figure 7 - Project area report file identification record data definition]**

Okay. Let's look at Figure 7. This is the file that is coming back to us. The first thing we want on it is we are going to make sure which request you are responding to if there has been any kind of time delay, if we would had a change to the request. One of the things that can happen is the CDC can decide we need to change the frequency. This has gotten more urgent. We need a weekly or this has gotten much less urgent; we need it monthly.

They might also add a product or take a product off. Any time they do something like that, that changes the nature of their request and it changes what we are expecting to receive from you. The request ID was that first piece of information on the first record we looked at, which was 12345.

You will need to use that number in your file to respond to us. Then the next piece of information in that header record, which identifies who is recording this information is you project area code which is a string of alphanumeric characters like NYC.

Then the date on which you are doing this inventory, or for which you have collected this inventory. For instance, if you are collecting weekly inventory, this date will be Friday. It will be Friday night at midnight. That will be the time that we want to see on it because you would have been collecting it as of what you have on hand Friday night at midnight.

Then the next field is how many records are you sending us. How many current records do you send us? If you are doing this weekly, you are going to be sending this header record with the request ID and your project area and each week the new reporting date and how many records are in the file.

If for some reason you have none of the products that we are requesting on hand anywhere in your state, then you would still send us one of these but your record count would be zero.

Mac-Arthur Louis: All right. If we have none of the product we are sending, you still want two files from us.

Betty Baker: We want to receive a report file from you. It can say zero. That is fine. The reason we want to do that is we want to make sure that we are not missing data because somebody's system is down. We want to know that everybody sent and we got it so that there is not something broken in the system between you and us. That is the reason for the zero record.

In the much longer data exchange specification document, there is an explanation of this.

Mac-Arthur Louis: Okay. If we do not have this particular product, we still send you zero whether we ever, ever had it before.

Betty Baker: Right, so we know that you did not have any of the two NDC codes and you did not have any N95 respirators as we look at our examples in any of your facilities.

Mac-Arthur Louis: That is going to mess up your numbers if I am reporting a product I have never had but I am putting zero in it.

Betty Baker: This does not tell me any products. This just says for this report I do not have any of your data.

Mac-Arthur Louis: Okay.

Betty Baker: **[Figure 8 - Project area report file count record data definitions]** All right. Now let's look at Figure 8, which is what you are going to tell us about each one of the products we asked for. The first thing is the name of the facility where this product is located. The field after that is at what level is this facility. Is this a state warehouse? Is this a regional warehouse? Or is this a local facility?

Then the next field is the facility type code. In the document that you will receive there is a list of all of the facility types, which are the same types that I believe were used in H1N1. We have some short abbreviated codes that can be used to identify those facility types.

This is a place where we are asking for a little bit of feedback. We think the logical step would be for you to send us this code - that is what we would like. But if you would prefer to send us the actual facility type name such as federal VA hospital, I am looking to see if I have a copy of it.

For example, there is an alternative care facility and we have an abbreviation of ALTCARE. This table of these values will be in the specifications so you can see what those codes are and use the appropriate code for you facilities.

We would not expect those codes for anything except the local facilities. We would know state and regional were warehouses. Then the fourth field is the zip code where that facility is located. The product description, the next field, is how you have that product described in your system.

AJ Lorenzen: I am sorry to interrupt. Could I ask a question on the zip code? It is saying it is a five-digit number. What about the zip plus four codes?

Mac-Arthur Louis: Yes.

Betty Baker: The CDC did not ask for the zip plus four.

AJ Lorenzen: Well I am just saying at least in our system they are built in as what they are.

Mac-Arthur Louis: Right.

AJ Lorenzen: I was hoping that maybe you could expand that field to nine characters.

Betty Baker: We certainly can.

AJ Lorenzen: This would give us the option, if we do not have it, we can certainly report the five. If we do have it, then we can certainly report what is in our file. Otherwise we would have to modify our files.

Mac-Arthur Louis: Yes.

Betty Baker: Oh no, let's not make you modify the files. We can easily expand. Do you have hyphens in it?

AJ Lorenzen: I do.

Betty Baker: All right. Let's make it a ten-character field. How about that?

AJ Lorenzen: You all can define. There just needs to be a standard there because that is going to come up.

Mac-Arthur Louis: Right.

Betty Baker: Okay. Well let's use ten characters and make it non-numeric so you can put the hyphen in it.

Man: Yes.

Betty Baker: Let's do that. That is fine.

Product description. We are allowed 500 characters and that would be how you have the product described in your system. Then we have the NDC. Of course they are only valid for pharmaceuticals. They will not have an NDC for the non-pharmaceuticals.

AJ Lorenzen: Okay. I have to stop you one more time. It is kind of the same issue. NDC codes are all 11-digit codes and I see that we are doing 13. Now my concern is are we going to have to put leading zeros in everything? And again, I am just trying to match my file with yours.

Betty Baker: No.

AJ Lorenzen: We have the 5-4-2 sequence, which I think everybody else probably has as well. So...

Betty Baker: Yes. Well CDC's got some hyphens in there. We will accept the hyphens and the asterisks; you do not have to pad what you have. You send us what you have.

AJ Lorenzen: We do not use hyphens. We just do numeric. You will accept it either way? So with or without hyphens. You are going to have to define that. Otherwise the files are not going to match and we are going to end up with problems.

Mac-Arthur Louis: Yes. Because if you are looking for 12345 dash 4, yours is looking for 12345, that is not going to have a match.

Betty Baker: Right. We were expecting hyphens and asterisks to come in. They somehow - NDC codes were - where we were looking at the information. Do some of you have it split into component parts?

Paul Petersen: We do in Tennessee.

Betty Baker: You split them in Tennessee?

Man: And here in Minnesota we have them with the hyphens.

Betty Baker: Okay. So Tennessee you could give them to us with hyphens. Right?

AJ Lorenzen: Regardless of how the file is set up could you accept one or the other? That way nobody has to do any modifications.

The other thing is since it is 11 anyway. I am just asking for standardization there.

Betty Baker: Okay. Yes we will have to figure out the best way to do that.

AJ Lorenzen: Just be sure to define these formats because we need to set our files up according to these formats or the stuff you are going to get from us is not going to do anybody any good.

Betty Baker: Absolutely. I have noted under the validation that we were expecting hyphens and asterisks. Is anybody using asterisks in their files to represent those extra leading zeros that since put in?

Man: No.

AJ Lorenzen: No.

Man: We are not in New York.

Betty Baker: No asterisks. Okay. That is good to know. All right. Then with the lot number, we are giving ten positions for that and we do not know whether you might have alphabetic characters in those. We are going to assume alphanumeric.

If it is a pharmaceutical, we are going to expect a lot number. If it is not a pharmaceutical, there might be some non-pharmaceuticals for which you have lot numbers and we can accept those. We are not requiring them. We are only requiring them on the pharmaceuticals.

Then there is the expiration date. We are expecting an expiration date on all pharmaceuticals and requiring it. Then the product name, this is the product name that you got right - if N95 was the product name in the request for a non-pharmaceutical, that is what would be here, N95 respirator.

It is only for the non-pharmaceutical products. If we do not have an NDC code, this field is required. If we do have an NDC, this field should be null. That will be from that list that the CDC is preparing.

The next field is the catalog or stock number. This would be whatever you have in your system and we are not requiring it. We are allowing it for the non-pharmaceuticals. We do not need it for the pharmaceuticals.

Paul Petersen: What is the difference between the product description and the product name?

Betty Baker: The product description would be however you have this recorded in your system. For instance, you might have a brand name for a pharmaceutical. You might include the brand name in the description of your product. I do not know what might be in your product description.

This field though has to match the list that CDC is going to provide, this product name. What Ben has said is that product name is going to match what is in the CDC stockpile formulary.

Paul Petersen: At some point we are going to get some big master list so we all have to modify our inventory management systems and change product names around is what I am guessing to standardize this.

Betty Baker: It sounds to me like there is going to have to be some standardization somewhere because it is easy with NDC. Once you get out of that, if the name on the formulary does not exactly match something in your system there, I do not see any way it can be automated from your end to automatically pull the right product.

Paul Petersen: I know just from experience every state is going to have a different description and potentially product name for every single N95 respirator.

Betty Baker: Right.

Paul Petersen: If we do not have a standard that comes from CDC it is going to be very confusing.

Betty Baker: Right. That is why we are working on that list. As soon as it is available and cleaned up, we will definitely get it out to everybody.

Ben Erickson: Hey Betty, this is Ben again. I think this is a touchy subject about the non-pharmaceutical products and not having any standard naming. I think the question came up was the difference between the product name and the product description.

The product description would typically be the long description that is in the push package files that we give out when we send out a product. That will list everything all in basically one cell. The question that I would like to ask is if you went into your inventory system to find out how many N95 respirators have, how would you go in there to clear your database to pull that particular product out?

Paul Petersen: In the product name in Tennessee at least we have N95 respirator in the product name. When you have all the different model numbers and everything else, where you put it and in what order can change I think.

Betty Baker: Right.

Ben Erickson: Yes. Unless you have it in your inventory system parsed out, separated out, it is going to be very difficult. Then you are going to have to read between the lines to pick up the individual item that you want within a certain line item of a product.

Betty Baker: That makes it very, very difficult to automate. That is why we are pushing for a standard list of product names.

Paul Petersen: This may be challenging with the non-pharmaceuticals because a lot of states have our own caches of different products that are not specifically from the SNS maybe through ASPR dollars or other things. We are going to have different respirator types than possibly you all have in your caches also.

This maybe bigger than that than just what you all have.

Ben Erickson: Yes. It actually is much larger than that because in the capabilities document the reporting requirements are for all available assets and not just stuff from the stockpile.

When it comes into your system, typically NIOSH or the 3M 1860 or 1850 or whatever the name is, the model number is small would be a line item and it would be broken down I would think by size because it is a different item for the same product.

Paul Petersen: Right.

Betty Baker: I am hearing from you all that you are interested in a standardized name list.

Paul Petersen: Yes please.

Betty Baker: Yes. All right. That is good. That is the direction we have been moving in. We know that that can cause work on your end but as you said, in order to get something that comes out sensible, we are going to have to be using the same names.

AJ Lorenzen: This is AJ again. I was wondering if you all looked at the Department of Defense. They have standardized all of their naming in their database. I do not now if you maybe do not have to reinvent that wheel. Maybe it is already out there.

Ben Erickson: I did not want to mention it but we have access to the UDR disk, which does touch up on the DoD's inventory list. That is where we are compiling the names. However the challenge that we have, not to get into it too much, is how the products are put into our inventory system and how that pipe file is produced.

There are politics and it is challenging to say the least for our logistics people to put the products into a standard way so that this whole process can work. We are looking at the DoD database that they have for non-pharmaceutical products and obviously for the pharmaceutical products but we have that pretty much taken care of.

We have a bunch of people working on the best way to capture non-pharmaceutical products right now.

AJ Lorenzen: I just have one other comment. For the non-pharmaceuticals, all of them or the vast majority of what we stock have universal product codes, I do not see any fields that we could use. That is how we inventory them because they are all bar coded at some level, so we just use the UPC code.

I know it is kind of late in the game to even be talking about that whole issue. Maybe if there was an optional field, that would help you all sort out if there are questions, and it could be an optional field. If there was a UPC code in that field and you had a master list, you could certainly verify the product. Just a thought.

Ben Erickson: Actually that is a really good point. Let me write that down in my notes and I'll bring it up to our folks in the logistics branch to see how that can be accomplished, instead of relying on other things, to rely more on a numbering system because that is inevitably what I'd love to do in the first place but obviously that is not possible as of right now.

AJ Lorenzen: Yes, I agree. It would be nice - I think some states already capture that is my guess. That information probably is already in their files. At least from our standpoint if we could just give you a UPC code and then if you have a master list then you can populate the description code with whatever your appropriate description would be.

Betty Baker: This would work just like the NDC code, right?

AJ Lorenzen: Exactly. It is the exact same concept. Yes.

Betty Baker: When we would make a request, we could tell you that UPC code.

AJ Lorenzen: Well yes. You would want to give us a descriptor code because at some point in time we do not have any way of having a list of all the UPC codes.

Betty Baker: Right.

AJ Lorenzen: I can't speak for the group, but we certainly have a list of quite a few of the UPC codes of the non-pharmaceutical products that we stock.

Betty Baker: Okay.

AJ Lorenzen: It is just in our system, it is just another field.

Betty Baker: Okay.

AJ Lorenzen: I am going to say one more thing and then I'll be quiet. It would be really helpful if somewhere in here if you would just give us one or two user defined fields - they could be alphanumeric – to use for some unique numbers and maybe to identify what is an SNS item number versus a state supplied number that maybe have the same NDC code.

If at some point in time you would consider giving to the states one or two or three user defined fields for our own use, I think everyone would like that.

Betty Baker: I can understand that. We will definitely look into that. Does everyone have UPC codes? Let's do a poll here.

Mac-Arthur Louis: I do not have UPC codes. This is Mac-Arthur Louis from New York State Department of Health. I welcome that idea if we could get a copy of that file.

Betty Baker: Okay. You do not have them but you welcome the idea. Yes. Good. Okay.

Chuck Berning: This is Chuck Berning. We do not carry UPC codes. Indiana.

Betty Baker: Indiana. They would be a nuisance to you?

Chuck Berning: Well we would have to add them.

Betty Baker: Okay. All right. Anybody else?

Paul Petersen: Tennessee. We do not currently capture them but we do have the capability of doing that.

Betty Baker: Okay.

Man: Minnesota. We do not have those in our system but we could capture that as well.

Betty Baker: Okay. All right.

Mike Magner: This is Mike Magner from Virginia. I do not think we have those in ours but we could probably add that.

Betty Baker: You would probably have to add a field?

Mike Magner: Yes.

Betty Baker: Indiana and Virginia would have to make as system modification to use them. That is other people either have the code or they have a place for the code at least.

Man: Right.

Betty Baker: So it would be getting the codes into the system. All right, very good information.

AJ Lorenzen: This is AJ one last time. The way it sounds to me, it would be useful if we could report one or the other or both if we have them. I guess that is my point. If we had the UPC code and you have the name, we do not need to populate the field.

If we do not have it, then we could certainly populate the field, so make that an optional field, not a required field. I do not know if that is a possibility but maybe that is just something that you could consider.

Betty Baker: We can consider that. Before this specification is delivered, we will get that resolved. Okay. The last two fields on the screen here are a stock number which would be whatever number you might have associated with the non-pharmaceutical product. It is not required but it is allowed.

The next field is the size and that is allowed for non-pharmaceutical products. And examples would be like the size for respirators. Then we are on to the count field.

The first one is units per case. That is how many dispensable units or products are in one case, which would be how many bottles of pills are in the case. Field 13 is the number of on-hand cases you have. Field 14 is how many units you actually have.

You would either tell us how many units per case you have and how many on hand cases and we can figure out how many actually dispensable units that is. Or if your inventory system keeps it by actual dispensable units, you can just tell us you have 5000 bottles. You should not provide all three of them. You should provide 11, 13 or 14. That allows most people to deal with this.

AJ Lorenzen: I am sorry. This is AJ. I just have one other question if we are tracking individual tables and not containers.

Betty Baker: Okay.

AJ Lorenzen: I do not know if you could do another either or actual number of doses, not dispensing cases but doses.

Betty Baker: We could. We will have to go back to the drawing board a bit for that.

Ben Erickson: AJ, shouldn't that be similar as units though? Shouldn't that be the same thing?

AJ Lorenzen: No, because we might have ten bottles but if they have 20 that means we have 200. So we have 200 tables on hand.

Ben Erickson: But you are dispensing 20 to one person.

AJ Lorenzen: Right, but if we are keeping track of our inventory and number of tablets on hand...

Man: Do not do that.

AJ Lorenzen: Well we define it in the smallest unit because if we are going to go out to the PODs, some of these folks are going to be dispensing partials because of what is going on. If we are going to delve down into the POD level, you are going to have pediatrics, you might be using tablets to make suspensions so you are not going to use 20 tablets.

I certainly see your point and I absolutely agree with it but what I am saying is if we are looking at a system that you want to design at the onset so is usable or at least everybody communicate their data, I think you should offer for all at least as many identifiable options as there are out there.

Betty Baker: So I could have a 15 that was number of doses?

AJ Lorenzen: Yes. Well, you could call it what you want but it is actual number of doses not to be confused with dosage units.

Betty Baker: Right.

Man: Maybe you need a unit of measure to correspond with...

AJ Lorenzen: There we go. Perfect.

Man: Right.

Mac-Arthur Louis: Yes. Because that is how we are tracking it.

AJ Lorenzen: And that is how we actually track it too. We can put in a case, a box, a pallet, a tablet and it is a separate field. It sounds like that is the standard that we are all using anyway.

Betty Baker: Okay. That is certainly doable. We will go back and reevaluate and determine how best to handle that before we publish the real thing.

Mac-Arthur Louis: Sounds good to me.

Betty Baker: All right. We are taking into account that you have it in some cases right down to the number of tablets.

Mac-Arthur Louis: Right. Then you wouldn't have to worry about those 12, 13 and 14.

Betty Baker: Exactly.

Paul Petersen: As long as it is not required field.

Betty Baker: Right. I do not think everybody has it that way, so we will have to figure out a way to accept it as you people have it stored and have it make sense to people at the CDC who are trying to figure out how much inventory is on hand.

I want to go back to the top of this figure to talk about what makes one of these records unique. The first thing that makes one of these records unique is the facility name. Its zip code is another thing that makes it unique.

We can see that there might be two Shady nursing homes in your project area. Hopefully the zip code will make it unique for that facility. The next thing that would make your records unique would be the NDC code if it is a pharmaceutical.

The next thing that would make it unique would be the lot number if it is a pharmaceutical. Then the next thing is all the way down in the units per case. You could have the same lot number packaged in two different sizes of case.

If you had one case of this lot number where there were 100 bottles in it and another case with the same lot number, which has only got 50 in it, you would end up giving us two records for that; one for the 100-bottle case and one for the 50 bottle case.

In the documents you will get there is more explanation about that. We are pretty sure we will get multiple records for the same facility and we might even get multiple records for the same NDC code and lot number and we are aware of that.

[Figure 9 - XML syntax for project area report file] Okay. Let's look at some examples of this file, the file you are sending to us. Here is the roadmap

for the XML version. It shows the identification section which has that request ID in it, your project area, the reporting date and how many count records you are sending us.

Then there are individual count records. Each one includes those fields we talked about, facility name, the location jurisdiction type, the facility type, the zip code, product description, NDC, lot number, expiration date, product name, stock number, units per case, on hand cases and on hand units.

There will be changes as we have discussed.

Mac-Arthur Louis: Shouldn't there be reporting period on that file too?

Betty Baker: No because you do not need to tell us that because you are telling us what request you are answering to and that request is either for month or week or day. On our end we know that.

When you tell us that you are responding to request 12345, which was the one we looked at at the beginning, we know that is one that is based on days and we are getting it on Mondays and Fridays. I think that is what I said at the top, so we would not need that.

Then there is a second count record. Let's scroll down a little farther. Then the file closes off. Let's look at the next one with actual data in it.

[Figure 10 - XML project area report file] Okay. We have request 12345. This is for Alabama. There is the reporting date, 2011-05-01, 235900 and it is got two records in it that we are probably - reporting on two products.

This first record is from the Alabama RSS and that is a state level. Since it is a state level, facility type is not included; and then the zip code and then the product description and the NDC, the lot number, the expiration date and the units per case and the on hand cases. Not all the fields. It is on the ones that are necessary in the case of XML.

The second product that is being reported from the Public Health Department and that is local. That facility type was LHD. There is a zip code and product descriptions, which is what somebody had in their file. There is a little tricky thing out there on the right hand end of that product description field. It is described in the data exchange specifications.

If you have certain special characters in your data such as an ampersand and you are using XML, you have to do something to tell PHINMS and to tell XML you really want an ampersand here. That is not one of your special characters that give instructions. That is why it says ampersand AMP semicolon. If that were printed out out of the XML, it would just be the ampersand character.

Then we have the lot number and the product name. This would be the product name; here are the product names. It may end up being a UPC code. Then the stock number, size and units per case and on hand cases.

[Figure 11 - delimited text syntax for project area report file] We look at a delimited one next. Figure 11. We see the mock-ups that shows what the information is that is going to be coming in.

[Figure 12 - sample delimited text for project area report file] Then we have an actual file here which shows the request ID 12345, Alabama, the

reporting date and there are two records. Then we have the pipe-delimited records showing the different products. I made these at a different time.

This is doxycycline something or other. Because it is a pharmaceutical, we have an NDC code and a lot number and an expiration date; and this number of units per case and number of cases.

The second one is the Huntsville record where it is local and so we have to have the type of facility. We have the description. We have a lot number and we have a product name and a stock number and a size and 20 units per case, 5000 cases on hand.

We are at the end of the data that we are expecting from you all. This is - we have learned a lot. I hope we have not confused everybody too much. Are there any other questions about what you have just heard or any other comments you would like to make about this?

AJ Lorenzen: This is AJ. My only request would be when you get this in a final version is that you really spend time and clearly define all of those fields for us. The examples that you are showing here is terrific because we can actually see what we need to do.

But when you get to the point of actually documenting the system, clearly document it and also give real world examples in the formats that you need so that if somebody hasn't been involved in this process that it is I guess take the time to make it very, very clear.

Betty Baker: Thank you. We intend to do our very best at that. As a matter of fact, we would really like to meet with this group one more time when we have this full document in a state that we would like to publish it in.

We would really like your feedback before we send it out all over the country. We fell like this group has given us a great deal of information and helped us tremendously in our process.

Caroline Westnedge: **[Slide 3]** I am going to just pull out the end of our slides quickly. As Betty mentioned, we are going to take your comments and suggestions and incorporate them into our data exchange specification and then share that document with you.

Be on the lookout for that along with an email about when we are going to schedule another Webinar to discuss you comments and suggestions. Once we receive those, we will incorporate that into our final document and then publish that to all the project areas.

That is it for today. I want to pause and just see if there are any final questions from anyone.

Mike Magner: Mike from Virginia. I have a quick question. We are going through our process of updating our database per the PHII grant and I was wondering is there a contact name at CDC that we could call for technical support as we are doing this?

Betty Baker: I am sorry. Would you repeat that?

Mike Magner: Yes. I am looking for a point of contact for CDC. As we are going through our database and trying to make I compliant so that we can know exactly what we have been talking about today, and that is send you all data. I was just wondering if we can get a point of contact so if we have questions or we need to test something that we could contact them.

Betty Baker: The data exchange specification document that is going out will have information about who to contact. I am certainly willing to answer emails. I used to be real technical in a former life.

Guy Faler: Yes. Let me just mention that we definitely have the capability to work with each of you on more highly technical discussions. We could potentially drill down more into the data fields. We could review your schemas if you would like us to do that and make suggestions. We have a number of people available that could help out in that area.

I would send a request to crahelp@cdc.gov and we can schedule a call to kick off some kind of process like that. Would that be helpful?

Mike Magner: Well I kind of need a name and a phone number. I have called to call CRA help before and like they did not know what I was talking about or how to direct my call.

Guy Faler: Okay. Well let's see. Ben, I am happy to have them call me. That is me the Guy Faler on there.

Caroline Westnedge: You have any other questions? Okay. Well thanks everyone for joining us today and we will be back in touch with you shortly with this document for you to review. Thank you.

Coordinator: That does conclude today's conference. You may disconnect your lines at this time.

END